FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated averag hours per respo	
SEC USI	E ONLY
Prefix	Serial
DATE RE	CEIVED

Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Type of Filing: New Filing Amendment Amendment No. 1 to Form D filed on July	Section 4(6) ULOE
. The state of the	7 16, 2002
A. BASIC IDENTIFICATION DATA	Cr. Co.
1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Pictos Technologies, Inc.	SEP 1 9 7002
· · · · · · · · · · · · · · · · · · ·	Telephone Number (Including Area Code) (831) 430-5300
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Semiconductor and software solutions for the digital camera and mobile imaging appliance	PROCESSES
Type of Business Organization corporation	please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year	Actual Estimated e: D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

. ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

<u> </u>		A.	BASIC ID	ENTI	FICATION DATA				
Each beneficial owEach executive offi	he issuer, if the issuer	has been organ to vote or dispo rporate issuers	ose, or direct the and of corporat	e vote	or disposition of, 10%				securities of the issuer; nd
Check Box(es) that Apply:	Promoter	☐ Bene	ficial Owner	\boxtimes	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Strong, Kevin				_					
Business or Residence Addre	ess (Number and Str	eet, City, State	, Zip Code)						
C/o Pictos Technologies, In	c., 5000 Birch Road	d, Suite 7000,	Newport Bea	ch, C	A 92660				
Check Box(es) that Apply:	Promoter	Bene	ficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	findividual)								
Holman, Rick									
Business or Residence Addre		= "	-						
c/o Pictos Technologies, Inc	., 5000 Birch Road	, Suite 7000, I	Vewport Beac	h, CA					
Check Box(es) that Apply:	Promoter	∐ Bene	ficial Owner		Executive Officer	<u>⊠</u>	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Hearst, William R.			## ***********************************						
Business or Residence Addre	•	• •	•						•
c/o Kleiner Perkins Caufiel	d & Byers, 2750 Sa	nd Hill Road,	Menlo Park,	CA 9	94025				<u></u>
Check Box(es) that Apply:	Promoter	Bene	ficial Owner	_ [] 	Executive Officer	⊠ ——	Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Decker, Dwight								_	
Business or Residence Addre		-	-						
C/o Conexant Systems, Inc.				ornia		_			
Check Box(es) that Apply:	Promoter	⊠ Bene	ficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	,								
Kleiner Perkins Caufield &								_	175-77
Business or Residence Addre	•		• •						
2750 Sand Hill Road, Menl				arst					
Check Box(es) that Apply:	Promoter	⊠ Bene	ficial Owner		Executive Officer		Director	Ц	General and/or Managing Partner
Full Name (Last name first, i	findividual)								
Conexant Systems, Inc.				_					
Business or Residence Addre		_	-						
4311 Jamboree Road, Newp				ght De		_			
Check Box(es) that Apply:	Promoter	⊠ Benet	ficial Owner		Executive Officer	Ш	Director		General and/or Managing Partner
Full Name (Last name first, i	findividual)								
Sierra Imaging, Inc.			-	_				_	
Business or Residence Addre	*	•	•						
4311 Jamboree Road, New									
	(Use blan	ik sheet, or cop	y and use add	itiona	copies of this sheet	, as ne	cessary)	-	

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity sec Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 	
	General and/or Managing Partner
Full Name (Last name first, if individual)	
Chen, Duen-Chen	
Business or Residence Address (Number and Street, City, State, Zip Code)	
C/o United Investments Company, Sf-2, No. 76, Sec. 2, Tun Hwa S, 106 Taipei, Taiwan, ROC	states
	General and/or Managing Partner
Full Name (Last name first, if individual)	
Ezequelle, David	
Business or Residence Address (Number and Street, City, State, Zip Code)	
C/o Alloy Ventures, 480 Cowper Street, 2 nd Floor., Palo Alto, CA 94301	
	General and/or Managing Partner
Full Name (Last name first, if individual)	
Lean, Dr. Eric	********
Business or Residence Address (Number and Street, City, State, Zip Code) C/o International United Technology Co., LTD, No. 921 Po Ai Street, Chupei, Hsin-chu, Taiwan 302, ROC	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director G	General and/or Managing Partner
Full Name (Last name first, if individual) Decker, Dwight	
Business or Residence Address (Number and Street, City, State, Zip Code)	
C/o Conexant Systems, Inc., 4311 Jamboree Road, Newport Beach, California 92660-3095	
	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	ieneral and/or Ianaging Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
	eneral and/or Ianaging Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)	

				B.	INFOR	MATION.	ABOUT O	FFERING				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									Yes	No ⊠		
2. What	What is the minimum investment that will be accepted from any individual?								\$ Yes	N/A No		
3. Does t	the offering p	ermit joint ov	wnership of a	single unit?					•••••			
remun person	the information teration for so to or agent of a ve (5) persons only.	licitation of p broker or dea	ourchasers in a	connection w d with the SE	vith sales of s EC and/or wit	ecurities in th h a state or st	ne offering. I ates, list the	f a person to l name of the b	be listed is an roker or dea	n associated ler. If more		
Full Name (Last name fir	st, if individu	ual)									· · · · · · · · · · · · · · · · · · ·
N/A Rusiness or	Residence Ac	drace (Num	har and Stree	t City State	Zin Code)							
Dusiness of	Residence A	adiess (Italii	oci and succ	i, City, State	, Zip Code)							
Name of As	sociated Brol	er or Dealer										
States in Wi	hich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers							
(Check "	All States" or	check indivi	duals States)		·····			•••••			□ A1	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
N/A	Last name fir Residence Ad			t, City, State	, Zip Code)							
Name of As	sociated Brok	er or Dealer									···	
States in Wh	nich Person L	isted Has So	licited or Inte	ends to Solic	it Purchasers			<u> </u>		, t.	*L.L.	
(Check "A	All States" or	check indivi	duals States)		••••••		•••••	********************			☐ Ai	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[fN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
N/A	Last name fir		, 									
Business or	Residence Ac	ldress (Numb	per and Stree	t, City, State	, Zip Code)							
Name of Ass	sociated Brok	ter or Dealer										
States in Wh	nich Person L	isted Has Sol	licited or Inte	nds to Solic	it Purchasers			_				
(Check "A	All States" or	check indivi	duals States)		••••••			••••••			□ A1	1 States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Amount Alored
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$_8,700,000.00	\$_8,619,848.00
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$_
	Other (Specify)	\$	\$
	Total		\$8,619,848.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	14	\$_8,619,848.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	•	\$
	Regulation A		\$
	Rule 504		\$_
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$20,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Consulting	— ⊠	\$210,000.00
	Total	\boxtimes	\$ 230,000.00

	C. OFFERING P	PRICE, NUMBER OF INVESTORS, EXPENSES A	ND USE OF PROCEEDS	
	total expenses furnished in response to Part C	e offering price given in response to Part C - Question I - Question 4.a. This difference is the "adjusted gross		\$ <u>8,470,000.00</u>
5.	the purposes shown. If the amount for any purp	ss proceeds to the issuer used or proposed to be used for e pose is not known, furnish an estimate and check the box is listed must equal the adjusted gross proceeds to the issue.	to the	
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		S	□ \$
	Purchase of real estate		🗆 \$	□ s
	Purchase, rental or leasing and installation of	machinery and equipment		\$
	Construction or leasing of plant buildings and	facilities		S
	Acquisition of other businesses (including the used in exchange for the assets or securities o	e value of securities involved in this offering that may be f another issuer pursuant to a merger)	e 	□ s
	-			
	, -			
	•			
	· · · · · · · · · · · · · · · · · · ·			
	Column Totals		[] \$	∑ \$ <u>8,470,000.00</u>
	Total Payments Listed (column totals ad	lded)	🛚 🖾 \$8,47	70,000.00
		D. FEDERAL SIGNATURE		
ınde		he undersigned duly authorized person. If this notice is files and Exchange Commission, upon written request of its state 502.		
	er (Print or Type)	Signature	Date	
	os Technologies, Inc. ne of Signer (Print or Type)	Title of Signer (Print or Type)	September /6, 2002	
	in Strong	President and Chief Executive Officer		
		ATTENTION		
	Intentional Misstatements or	Omissions of Fact Constitute Federal Criminal Viola	tions. (See 18. U.S.C. 100	1.)